



## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R?::	None
Title::	RIFLE FOREARM ASSIST BRACE
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	2
Total Drawing Sheets::	3
Small Entity::	Yes
Petition Included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	John
Family Name::	Crawford
City of Residence::	Portsmouth
State or Province of Residence::	NH
Country of Residence::	US

Street of mailing address:: 20 Davis Road

City of mailing address:: Portsmouth

State or Province of mailing address:: NH

Postal or Zip Code of mailing address:: 03801

**Correspondence Information**

Representative Customer Number::	24111
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**Domestic Priority Information**

<u>Application::</u>	<u>Continuity Type::</u>	<u>Parent Application::</u>	<u>Parent Filing Date::</u>
<u>This Application</u>	<u>An application claiming the benefit under 35 USC 119(e)</u>	<u>60/492,249</u>	<u>08/04/03</u>